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00173 7590 02/28/2005

WHIRLPOOL PATENTS COMPANY - MD 0930
 500 RENAISSANCE DRIVE - SUITE 102
 ST. JOSEPH, MI 49085

04/08/2005 MBIZUNE2 00000001 231660 09977757

01 FC:1501 1400.00 DA
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BARBARA L. KATOWICH	(Depositor's name)
<i>Barbara L. Katowich</i>	(Signature)
APRIL 7, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/977,757	10/15/2001	Dianne D. Mueller	US20010115	3965

TITLE OF INVENTION: TIME-BAKE CYCLE FOR A REFRIGERATED OVEN

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	05/31/2005
EXAMINER	ART UNIT		CLASS-SUBCLASS		
CIRIC, LJILJANA V	3753		165-254000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

JOHN F. COLLIGAN
 ROBERT O. RICE
 CLIFTON G. GREEN

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

WHIRLPOOL CORPORATION

BENTON HARBOR, MICHIGAN USA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

- Issue Fee
 Publication Fee (No small entity discount permitted)
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- A check in the amount of the fee(s) is enclosed.
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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 23-1660 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature _____

Robert O. Rice

Typed or printed name _____

APRIL 7, 2005

Date _____

26,574

Registration No. _____

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